

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Complete if Known	
				Application Number	10/517,869-Conf. #3025
				Filing Date	October 12, 2005
				First Named Inventor	Anders LEHMANN
				Art Unit	1614
				Examiner Name	P. G. Spivack
				Attorney Docket Number	5999-0517PUS1
Sheet	1	of	1		

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ² -Number-Kind Code ³ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁴

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Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²	
DS	CA	Walker et al., Neuropharmacology, Vol. 40, page 1, (1990) (Abstract)		

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Examiner Signature	Phyllis Spivack	Date Considered	12/20/07
Birch, Stewart, Kolasch & Birch, LLP		ADM/mao	